In re	TOBE_	LANNY BRUCE
		Debtor(s)
Case	Number:	08-24733
		/(f known)

According to the calculations requi	0002183007
The presumption arises.	
The presumption does not ari	se.
(Check the box as directed in Parts I, III,	and VI of this statement.)
☐ The presumption does not ari	

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

Part I. EXCLUSION FOR DISABLED VETERANS AND NON-CONSUMER DEBTORS

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

If you are a disabled veteran described in the Veteran's Declaration in this Part I, (1) check the box at the beginning of the

1A	verification in Part VIII. Do not complete any of the remaining parts of this statement. Veteran's Declaration. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as					
	defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. § 901(1)).					
1B	If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.					
	☐ Dec	laration of non-consumer debts. By checking this box, I	declare that my debts are not primarily consumer of	lebts.		
		Part II. CALCULATION OF MONTHLY	INCOME FOR § 707(b)(7) EXCLU	SION		
		I/filing status. Check the box that applies and complete the t Jnmarried. Complete only Column A ("Debtor's Income")				
	penalty living a	Married, not filing jointly, with declaration of separate househor of perjury: "My spouse and I are legally separated under applipart other than for the purpose of evading the requirements of lete only Column A ("Debtor's Income") for Lines 3-11.	licable non-bankruptcy law or my spouse and I are			
2	1	Married, not filing jointly, without the declaration of separate ho in A ("Debtor's Income") and Column B ("Spouse's Inco	•	e both		
	d. 🛛 M	Married, filing jointly. Complete both Column A ("Debtor's 3-11.	Income") and Column B ("Spouse's Income")	for		
	All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six month total by six, and enter the result on the appropriate line. Column A Debtor's Income					
3	Gross	wages, salary, tips, bonuses, overtime, commissions.		\$6,806.67	\$2,158.00	
4	the diffi	e from the operation of a business, profession, or farm. erence in the appropriate column(s) of Line 4. If you operate r inter aggregate numbers and provide details on an attachment include any part of the business expenses entered on t	t. Do not enter a number less than zero.			
	a.	Gross receipts	\$0.00			
	b	Ordinary and necessary business expenses	\$0.00	\$0.00	\$0.00	
····	c. Business income Subtract Line b from Line a \$0.00					
	in the a	and other real property income. Subtract Line b from appropriate column(s) of Line 5. Do not enter a number less that of the operating expenses entered on Line b as a ded				
5	a.	Gross receipts	\$3,000.00	7		
	b.	Ordinary and necessary operating expenses	\$7,182.00	+		
	C.	Rent and other real property income	Subtract Line b from Line a	\$0.00	\$0.00	
6	Interes	st, dividends, and royalties.		\$0.00	\$0.00	

	- Conc.			
7	Pension and retirement income.		\$0.00	\$0.00
8	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is icompleted.			\$0.00
9	Unemployment compensation. Enter the amount in the appropriate column However, if you contend that unemployment compensation received by you or your was a benefit under the Social Security Act, do not list the amount of such compen Column A or B, but instead state the amount in the space below:	spouse	1	
	Unemployment compensation claimed to be a benefit under the Social Security Act Debtor \$0.00 Spou	\$0.00	\$0.00	
10	Income from all other sources. Specify source and amount, if necessary, liseparate page. Do not include alimony or separate maintenance payments if Column B is completed, but include all other payments of alimony or separate maintenance payments of column B is completed, but include all other payments of alimony or separate not include any benefits received under the Social Security Act or payments received, crime, crime against humanity, or as a victim of international or domestic terrorism.	s paid by your spouse arate maintenance. ceived as a victim of a war		
	a.	0		
	b.	0		
	Total and enter on Line 10		\$0.00	\$0.00
11	Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s).			\$2,158.00
12	Total Current Monthly Income for § 707(b)(7). If Column B has been com add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has completed, enter the amount from Line 11, Column A.	\$8,964.67	-	

	Part III. APPLICATION OF § 707(b)(7) EXCLUSION					
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result.	\$107,576.04				
14	Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	\$79.971.00				
	a. Enter debtor's state of residence: CALIFORNIA b. Enter debtor's household size:4	47 0,01 1120				
	Application of Section 707(b)(7). Check the applicable box and proceed as directed.					
15	The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI, or VII.					
:	☐ The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement.					

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15).

16	Enter the amount from Line 12.		\$8,964.67
	Column B that was NOT paid on a regular basis for the hidependents. Specify in the lines below the basis for exclusion	iding the Column B income (such as payment of the	
	spouse's tax liability or the spouse's support of persons of amount of income devoted to each purpose. If necessary not check box at Line 2.c, enter zero.	, list additional adjustments on a separate page. If you did	
17	amount of income devoted to each purpose. If necessary		
17	amount of income devoted to each purpose. If necessary not check box at Line 2.c, enter zero.	, list additional adjustments on a separate page. If you did	

18 Current monthly income for § 707(b)(2).

Subtract Line 17 from Line 16 and enter the result.

\$8,964.67

• •	-	Part V. CALCU	LATION O	F DE	DUCTIONS FROM	INCOME		
		Subpart A: Deductions un	nder Stand	ards	of the Internal Re	venue Se	rvice (IRS)	
National Standards: food, clothing, and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable household size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)						\$1,370.00		
National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 14b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.								
	Ho	usehold members under 65 years of ac	je	Но	usehold members 65 yea	rs of age or o	lder	
	a1.	Allowance per member	\$60.00	a2.	Allowance per member		\$144.00	
	b1.	Number of members	2	b2.	Number of members		0	
	c1.	Subtotal	\$120.00	c2.	Subtotal		\$0.00	\$120.00
20A	IRS	al Standards: housing and utilities; no Housing and Utilities Standards; non-mort s information is available at www.usdoj.gov	gage expenses f	or the	applicable county and house			\$508.00
208	Local Standards: housing and utilities; mortgage/rent expenses. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. Do not enter an amount less than zero. IRS Housing and Utilities Standards; mortgage/rental expense					\$0.00		
21						\$0.00		
Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8. 1 o 1 2 or more. If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)					\$422.00			
22B	Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for					\$0.00		

	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)					
	<u> </u>	⊠ 2 or more.				
23	Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. Do not enter an amount less than zero.					
	a. IRS Transportation Standards, Ownership Costs \$489.00					
	b. Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42 \$350.00					
	Ç.	Net ownership/lease expense for Vehicle 1	Subtract Line	b from Line a.		
24	Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoi.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs b. Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42 C. Net ownership/lease expense for Vehicle 2					
25	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social-security taxes, and Medicare taxes. Do not include real estate or sales taxes.					
26	payı	er Necessary Expenses: mandatory payroll deductions for emp roll deductions that are required for your employment, such as retirem not include discretionary amounts, such as voluntary 401(k) co	nent contributio	Enter the total average monthly ns, union dues, and uniform costs.	\$0.00	
27	pay	ner Necessary Expenses: life Insurance. Enter total avera for term life insurance for yourself. Do not include premiums fo whole life or for any other form of insurance.		emiums that you actually on your dependents,	\$0.00	
28	to p	er Necessary Expenses: court-ordered payments. Ente ay pursuant to the order of a court or administrative agency, such as not include payments on past due support obligations included	spousal or chil	thly amount that you are required d support payments.	\$0.00	
29	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.					
30		, , , ,	•	unt that you actually expend on other educational payments.	\$0.00	
31	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.					
32	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service such as pagers, call waiting, caller id, special long distance, or internet service to the extent necessary for your health					
33	Total Expenses Allowed under IRS Standards. Enter the total of Lines 19 through 32 \$5,					

\$7,588.00

B22A (C	micial F	orm 22A) (Chapter 7) (01/	08) - Cont.			5
			bpart B: Additional Living E	•		
	•	Note: Do not	include any expenses that	you have listed	in Lines 19-32	
			rrance and Health Savings Account Ex v that are reasonably necessary for yourse		he monthly expenses in the dependents.	
	a.	Health Insurance	\$0.00			
	b.	Disability Insurance	\$0.00	-		
34	c. Health Savings Account \$0.00					
"	Total	and enter on Line 34				\$0.00
		below:	his total amount, state your actual tot	al average monthly expe	nditures in the	
35	monthly elderly,	y expenses that you will con	care of household or family members. tinue to pay for the reasonable and neces nember of your household or member of y	sary care and support of	f an	\$0.00
36	incurre		ce. Enter the total average reaso our family under the Family Violence Prev ature of these expenses is required to be	ention and Services Act	ог	\$0.00
Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that reasonable and necessary and not already accounted for in the IRS Standards.						\$0.00
38	Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or					
Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gow/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.					\$0.00	
40	Continued the site black and site of the control that are will position to contribute to the					\$18.00
41	Total A	Additional Expense Deduc	ctions under § 707(b). Enter the tot	al of Lines 34 through 40	0	\$18.00
			Subpart C: Deductions fo	or Debt Payment		
	you ow Payme total of filing of	nt, and check whether the p all amounts scheduled as o	aims. For each of your debts that is stor, identify the property securing the debpayment includes taxes or insurance. The contractually due to each Secured Credited by 60. If necessary, list additional entri	secured by an interest in t, state the Average Mor Average Monthly Paymor in the 60 months follow	nthly ent is the wing the	
42		Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?	
76	a.	GAP Managers	4721 Winding Way, Sacramento, CA	\$6,963.00	☐ yes ⊠no	
	b.	Americredit	2004 Lexus RX330 (30K)	\$350.00	☐ yes ⊠no	
	c.	Ford Motor Credit	2003 Lincoln Navigator (85K)	\$275.00	☐ yes ⊠no	
	d.			\$0.00	☐ yes ☐no	
	e. \$0.00 🗀 yes 🗀no					

Total: Add Lines a - e

	Other payments on secured claims. If any of the debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.					
		Name of Creditor	Property Securing the Debt	1/60th of the Cure Amount		
43	a.	GAP Managers	4721 Winding Way, Sacramento, CA 9	\$1,950.00		
	b.	S. W. Maragar				
	C.	Co. of Sacramento Tax Co	4721 Winding Way, Sacramento, CA 9	95 \$280.00		
	d.			\$0.00		
	e.			\$0.00		
				Total; Add Lines a - e	\$2,255.00	
44	as pri	• • • • • • • • • • • • • • • • • • • •	y claims. Enter the total amount, of imony claims, for which you were liable at ons, such as those set out in Line 28.	livided by 60, of all priority claims, such the time of your bankruptcy filing.	\$0.00	
	the fo	oter 13 administrative expensioning chart, multiply the aministrative expense.	nses. If you are eligible to file a case ount in line a by the amount in line b, and		_	
	a.	Projected average monthly	Chapter 13 plan payment.	\$0.00		
45	b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gow/ust/ or from the clerk of the bankruptcy court.)					
	c. Average monthly administrative expense of Chapter 13 case Total: Multiply Lines a and b \$					
	Total Deductions for Debt Payment. Enter the total of Lines 42 through 45. \$9,84					
46	Tota	l Deductions for Debt Payn	nent. Enter the total of Lines 42 throu	ıgh 45.	\$9,843.00	
46	Tota	ll Deductions for Debt Payn	nent. Enter the total of Lines 42 throu		\$9,843.00	
46	1	Il Deductions for Debt Payn	Subpart D: Total Deduction		\$9,843.00 \$14,872.00	
	1	of all deductions allowed	Subpart D: Total Deduction	ons from Income of Lines 33, 41, and 46.		
	Tota	f of all deductions allowed	Subpart D: Total Deduction	ons from Income of Lines 33, 41, and 46. 07(b)(2) PRESUMPTION		
47	Tota	f of all deductions allowed Part V or the amount from Line 18	Subpart D: Total Deduction under § 707(b)(2). Enter the total /I. DETERMINATION OF § 7	ons from Income of Lines 33, 41, and 46. 07(b)(2) PRESUMPTION (2))	\$14,872.00	
47	Tota Ente	f of all deductions allowed Part V or the amount from Line 18 or the amount from Line 47 or they disposable income un	Subpart D: Total Deduction under § 707(b)(2). Enter the total /I. DETERMINATION OF § 7 (Current monthly income for § 707(b)(1) (Total of all deductions allowed under	ons from Income of Lines 33, 41, and 46. 07(b)(2) PRESUMPTION (2))	\$14,872.00 \$8,964.67	
48 49	Ente Ente Mon resul	f of all deductions allowed Part V or the amount from Line 18 or the amount from Line 47 or they disposable income un	Subpart D: Total Deduction under § 707(b)(2). Enter the total VI. DETERMINATION OF § 7 (Current monthly income for § 707(b)(1) (Total of all deductions allowed under § 707(b)(2). Subtract Line 49 to 1)	ons from Income of Lines 33, 41, and 46. 07(b)(2) PRESUMPTION (2)) (§ 707(b)(2))	\$14,872.00 \$8,964.67 \$14,872.00	
47 48 49 50	Ente Ente Mon resul 60-m	Part V r the amount from Line 47 thly disposable income unit	Subpart D: Total Deduction under § 707(b)(2). Enter the total Interest Inte	ons from Income of Lines 33, 41, and 46. O7(b)(2) PRESUMPTION (2)) f § 707(b)(2)) from Line 48 and enter the ant in Line 50 by the	\$14,872.00 \$8,964.67 \$14,872.00 (\$5,907.33)	
47 48 49 50	Ente Ente Mon resul formumi Initia Th this s	Part V or the amount from Line 47 thly disposable income unit month disposable income unit al presumption determination he amount on Line 51 is less statement, and complete the value of this statement.	Subpart D: Total Deduction under § 707(b)(2). Enter the total VI. DETERMINATION OF § 7 (Current monthly income for § 707(b)(4) (Total of all deductions allowed under § 707(b)(2). Subtract Line 49 for § 707(b)(2). Multiply the amount of the second of the	ons from Income of Lines 33, 41, and 46. 07(b)(2) PRESUMPTION (2)) r § 707(b)(2)) from Line 48 and enter the unt in Line 50 by the occeed as directed. the presumption does not arise" at the top of page 1 of the remainder of Part VI. eck the box for "The presumption arises" at the top of y also complete Part VII. Do not complete the remaind	\$14,872.00 \$8,964.67 \$14,872.00 (\$5,907.33) (\$354,439.80)	
47 48 49 50 51	Ente Ente Mon resul formumi Initia The	Part V or the amount from Line 47 thly disposable income unit month disposable income unit al presumption determination he amount on Line 51 is less statement, and complete the value of this statement.	Subpart D: Total Deduction under § 707(b)(2). Enter the total VI. DETERMINATION OF § 7 (Current monthly income for § 707(b)(4) (Total of all deductions allowed under der § 707(b)(2). Subtract Line 49 for a complete the stan \$6,575 Check the box for "Till perification in Part VIII. Do not complete the stan \$10,950. Check the stan \$10,950.	ons from Income of Lines 33, 41, and 46. 07(b)(2) PRESUMPTION (2)) r § 707(b)(2)) from Line 48 and enter the unt in Line 50 by the occeed as directed. the presumption does not arise" at the top of page 1 of the remainder of Part VI. eck the box for "The presumption arises" at the top of y also complete Part VII. Do not complete the remaind	\$14,872.00 \$8,964.67 \$14,872.00 (\$5,907.33) (\$354,439.80)	
47 48 49 50 51	Ente Ente Mon resul 60-m numl Initia Th this: Th page Ti VI (L	Part Ver the amount from Line 47 of the amount from Line 47 of the amount from Line 47 of the amount of the amount on Line 51 is less statement, and complete the amount set forth on Line 1 of this statement, and complete the amount on Line 51 is at times 53 through 55).	Subpart D: Total Deduction under § 707(b)(2). Enter the total VI. DETERMINATION OF § 7 (Current monthly income for § 707(b)(4) (Total of all deductions allowed under § 707(b)(2). Subtract Line 49 for § 707(b)(2). Multiply the amount of the second of the	ons from Income of Lines 33, 41, and 46. 07(b)(2) PRESUMPTION (2)) r § 707(b)(2)) from Line 48 and enter the unt in Line 50 by the occeed as directed. the presumption does not arise" at the top of page 1 of the remainder of Part VI. eck the box for "The presumption arises" at the top of y also complete Part VII. Do not complete the remaind	\$14,872.00 \$8,964.67 \$14,872.00 (\$5,907.33) (\$354,439.80)	
47 48 49 50 51	Ente Ente Mon resul 60-m numl Initia Th this s Th page Ti VI (L Ente	Part Ver the amount from Line 47 of the amount from Line 47 of the amount from Line 47 of the amount of the amount on Line 51 is less statement, and complete the amount set forth on Line 1 of this statement, and complete the amount on Line 51 is at times 53 through 55).	Subpart D: Total Deduction under § 707(b)(2). Enter the total VI. DETERMINATION OF § 7 (Current monthly income for § 707(b)(1) (Total of all deductions allowed under § 707(b)(2). Subtract Line 49 inder § 707(b)(2). Multiply the amounter § 707(b)(2). Check the box for "Total strain of Part VIII. Do not complete the strain of Part VIII. You may be set \$6,575, but not more than \$10,950. Incomplete the verification in Part VIII. You may be set \$6,575, but not more than \$10,950.	ons from Income of Lines 33, 41, and 46. O7(b)(2) PRESUMPTION (2)) from Line 48 and enter the ant in Line 50 by the occeed as directed. the presumption does not arise" at the top of page 1 of the remainder of Part VI. eck the box for "The presumption arises" at the top of y also complete Part VII. Do not complete the remaind occemplete the remainder of Part	\$14,872.00 \$8,964.67 \$14,872.00 (\$5,907.33) (\$354,439.80) er of Part VI.	
47 48 49 50 51 52	Ente Ente Mon resul 60-m numl Initia Th this: Th page Th VI (L Ente	Part V or the amount from Line 18 or the amount from Line 47 or the amount on Line 51 is less statement, and complete the voice 1 of this statement, and complete the amount on Line 51 is at lines 53 through 55). Or the amount of your total eshold debt payment amount	Subpart D: Total Deduction under § 707(b)(2). Enter the total VI. DETERMINATION OF § 7 (Current monthly income for § 707(b)(4) (Total of all deductions allowed under § 707(b)(2). Subtract Line 49 for the strain \$6,575 (Check the box and properties also and properties and \$10,950 (Check the verification in Part VIII. Do not complete the verification in Part VIII. You may least \$6,575, but not more than \$10,950 (Check the strain \$10,950) (Check the verification in Part VIII. You may least \$6,575, but not more than \$10,950 (Check the strain \$10,950) (Check t	ons from Income of Lines 33, 41, and 46. 07(b)(2) PRESUMPTION (2)) If § 707(b)(2)) From Line 48 and enter the ent in Line 50 by the coceed as directed. The presumption does not arise" at the top of page 1 of the remainder of Part VI. Eck the box for "The presumption arises" at the top of y also complete Part VII. Do not complete the remaind 00. Complete the remainder of Part by the number 0.25 and enter	\$14,872.00 \$8,964.67 \$14,872.00 (\$5,907.33) (\$354,439.80) er of Part VI.	

			PART VII. ADDITIONA	AL EXPENSE CLAIMS
	health month	and welfare of you and yo ly income under § 707(b):	xur family and that you contend shoul	erwise stated in this form, that are required for the id be an additional deduction from your current al sources on a separate page. All figures should reflect
58		Expense Description		Monthly Amount
~	a.			\$
	b.	b.		\$
	C.			
		<u> </u>	Total: Add Lines a, b, and c	\$
			Part VIII: VE	RIFICATION
	l decla	re under penalty of perjure ebtors must sign.)	y that the information provided in this	
57	Date:	10/27/09	Signature: _/s/ Tobe, :	Lanny Bruce Long Duce long
J.	Date:	10/27/09	(Debtor) Signature: /s/ Debora	A R. TODO DeborabeTone

(Joint Debtor, if any)

In re TOBE_LANNY BRUCE

Debtor(s)

MEANS TEST CALCULATION - SUPPLEMENTAL PAGE

All figures based upon the 6 month period before filing. Petitioners are both unemployed and the lender has obtained relief from the automatic stay on the Fair Oaks property.

Line 25: Taxes estimated using online tax calculator.

Line 34a: Includes all insurance deducted from Mr. Tobe's paycheck.